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		COMPLETE IF KNOWN				
•	•	pplication Number Not Yet Known				
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Declaration	Declaration Submitted after Initial Filling (surcharge (37 CFR 1.16 (e)) required)	Filing Date				
Submitted OR		Group Art Unit	Not	Not Yet Known		
with Initial Filing		Examiner Nam	e Not	Yet Knowi	n	
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Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number 3624 OR Correspondence address below or Bar Code Label										
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Na	ame or	Sumame		
Hermann					Gret	her		
Inventor's Signature Lange Ct.						14.04.05 Date		
Residence: City	Müllheim	State	Country German			Citizenship German		
Mailing Address Weilermatt 4 DEX								
Mailing Address	Mailing Address							
City	Müllheim	State	ZIP	79379	Count	german		
Name of Additi	Name of Additional Joint Inventor, if any:							
Give	n Name (first and middle [if any])			Family Na	me or S	Sumame		
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